PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004 01/727,99												
CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
FOR	1	NUMB	NUMBER FILED		NUMBER EXTRA		FEE		RATE	FEE		
BASI	CFEE						395.00	OR	14.54	790.00		
TOTA	AL CLAIMS	2	minus	20- 7	٠ ٦		=	i l	x\$22=	790.00		
INDE	PENDENT CL	AIMS 3	min	±3= · Ø	· Ø			OR				
MULTIPLE DEPENDENT CLAIM PRESENT						x41=		OR	x82=			
* If the difference in column 1 is less than zero, eater "O" in column 2						+135		OR	+270=			
						TOTA	L	OR	TOTAL			
A to the support of the support				(Cotumn 3)	· SMA	LL ENTITY	OR	OTHEI SMALL	R THAN ENTITY			
AMENDMENT A		- CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE		
	Total	.27	Minus	- 27	= 0,	x\$11=	= ·	OB	x\$22=	·		
	Independent	• 3	Minus	- 3	= 💋	x41=	:	OR	x82=			
,	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+135:	=	OR	+270=			
10 - 18 - Column 1) (Column 2) (Column 3)						TOTA		OR	TOTAL NODIT. FEE			
		CLAIMS	ETE E	HIGHEST	. (Column 3)	1		1				
MENDMENT B		REMAINING , AFTER AMENOMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	i pri i medicandida i	HELLAINI RATELE	ADDI- TIONAL :: FEE		
	Total	:27	Minus	-21	= (x\$11:	= .	OR	x\$22=			
	independent	•3	Minus	" 3	=	x41=	=	OR	x82=			
A	FIRST PRESENTATION OF MULTIPLE DEPENDEN				AIM	+135	=	OR	+270=			
		(Column 1)		(Column 2)	(Column 3)	TOT.	_	OR	TOTAL ADDIT, FEE			
- AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	••	=	x\$11:	=	OR	x\$22=			
	Independent	•	Minus	•••	=	x41=	:	OR	x82=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=						=	OR	+270=			
If the entry in column 1 is tess than the entry in column 2, write "O' in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Orall or Medicard Sets) than 3, enter "3." ADDIT. FEE ADDIT. FEE												